Submitter:

Ms. Barbara J. LeMoine

Organization:

American Foundation for the Blind

Category:

Individual

**Issue Areas/Comments** 

Low Vision Aid Exclusion

Low Vision Aid Exclusion

Testing accessibility for individuals who are blind or have low vision.

CMS-1270-P-1-Attach-1.DOC

Testing accessibility for individuals who are blind or have low vision.

Submitter:

Mr. John Clapp

Date: 05/03/2006

Organization:

Miami Lighthouse for the Blind and Visually Impair

Category:

Health Care Professional or Association

Issue Areas/Comments

Low Vision Aid Exclusion

Low Vision Aid Exclusion

I think Low vision aids should be paid for by medicare because visually impaired persons need to read their mail, books, and newspapers or magazines to stay active and involved in life. Maybe, based on one's income a contribution could be requested. I hope you will reconsider.

Submitter:

Mr. Gerald Niedermaier

Organization: Ba

**Badger Association of the Blind** 

Category:

Individual

Issue Areas/Comments

## Low Vision Aid Exclusion

Low Vision Aid Exclusion

### Sirs/Madams:

I have been a blind rehabilitation professional for almost 30 years. I have have worked diligently in providing training to keep people safe in the streets in in their homes. Distance vision aids, such as monoculars have proven invaluable in assisting my clients to locate bus stop signs from a distance without having to waste time crossing the street and leering these signs from 5 feet away. Monoculars have also assisted them in scanning for traffic which they would not have been able to see without their unaided eye. And, they assist them to see the often hard to read walk/don't walk signs letting them know when it is safe to cross when there is no traffic present to provide those much needed audible clues we teach them to use, also.

Hand held magnifyers also provide the user to be able to read things such as medicine bottles, emergency numbers, etc. We all know how critical it is to take medications on time, the correct dosage and the out of the correct bottle!

Closed Circuit Televisions (CCTV's) provide an additional aid to those whose blindness is not able to be helped with standard hand held magnifyers. These individual need the additional high magnification needed to do the above tasks, plus the CCTV's assist them to maintain their independence via reading recipes (having to resort to canned goods is very unhealthy eating), read instructions on how to use appliances, etc. After all, isn't independence what independent living is all about? Keeping people living in their own homes for as long as they certainly helps reduce the horrendous costs of assisted living and nursing homes. Including low vision aids is the right thing to do, and the costly thing to do. There is an old saying, "There but for the grace of God go I." You have no idea how these aids improve the health and quality of life for these individuals, many of whom have worked hard all their lives and paid their taxes. When you folks making this determination are in your 60's and 70's you will know what it is like. If you have macular degeneration in your family history, you can experience this life altering eye condition first hand when you are in your fifties. The CCTV will be a life saver for you. Unless you have a huge stash of cash available you can pay out of pocket for it. If not, well, you had better change your tune about excluding these aids. You may end up in a nursing home sooner than you think, especially if you have also have diabetes, the leading cause of new blindness in the US, and can't read the insulin guide on the syringe. Or, I have one better. Your elderly spouse whom you take care of and whom you love very much needs his/her medication, and you have to give them to her. But..tsk...tsk...you can't read the bottles, either without a CCTV. Are you going to guess at the dosage?

Denying Low Vision Aids is mean spirited and ill conceived. This country was founded on the principle of "Government of the people, by the people and for the people.", regardless of their ability or disability.

CMS needs to do the right thing. And that is, include low vision aids. You will appreciate this later on when you hair turns grey and the shoe is on the other foot. Many eye conditions are hereditary and you just never know, do you?

Gerry Niedermaier, M.A., COMS 9393 W. Mt. Vernon Ave. Milwaukee, WI 53226

Submitter:

Mr. Allan Brenner

Date: 05/03/2006

Organization:
Category:

Earle Baum Center of the Blind Other Health Care Professional

**Issue Areas/Comments** 

### Low Vision Aid Exclusion

## Low Vision Aid Exclusion

As an organization that provides training and rehabilitation services to many individuals who are losing their sight, a majority of whom are seniors, it is mean spirited and unacceptable to exclude vision aids to those on Medicare. Everyone must have an equal opportunity to access information and those who need to do so with the aid of adaptive equipment must not be treated as exceptions. Excluding low vision aids to people losing their sight is both heartless and very short sighted. Our "system" stresses independence which can only be achieved if people are able to take care of their basic daily needs. Having the means to accomplish such basic tasks as paying bills is essential if one is to remain independent and the alternatives are far more costly than the expenditure for magnifyiers. Please revise the decision and make it possible for an ever increasing population to live normal lives and not force our seniors who have paid their Medicare insurance for much of their lives to sacrafice independence for such a relatively small price.

Submitter:

Mrs. Theresa Maggiore

Organization:

Mrs. Theresa Maggiore

Category:

Other Health Care Professional

Issue Areas/Comments

## Low Vision Aid Exclusion

Low Vision Aid Exclusion

The exclustion of low vision devices is a short sighted decision. The provision of these devices allows individuals to maintain their independance and live in their own homes. This is far more cost effective and a better quality of life than nursing home care, especially after they break thier hip tripping over something they could have seen had they had better use of the remaining vision. Think again ladies and gentleman and do not be penny wise and pound foolish!

Submitter:

Barbara J. LeMoine

Organization:

Barbara J. LeMoine

Category:

Individual

Issue Areas/Comments

Low Vision Aid Exclusion

Low Vision Aid Exclusion
Attachment

CMS-1270-P-6-Attach-1.TXT

## docdispatchserv[1].txt

Docket: CMS-1270-P - Medicare Program; Competitive Acquisition for Certain Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) and Other Issues: Low Vision Aid Exclusion

Your proposal to treat low vision devices that use lenses (as eyeglasses do) is unconscionable. Individuals, and especially senior citizens, with low vision use magnifiers to perform many ordinary daily tasks of independent living. For example--they use magnifiers when grocery shopping, to read bus schedules so they can travel independently, and to read clothing labels to determine if a garment is washable or needs to be dry cleaned. They use magnifiers to write checks and read currency and financial statements. Privacy is important--most people don't want anyone else, even family, reading their bank statements, loan documents, or bills. With the help of a magnifier, they read mail and enjoy such personal items as photographs of their grandchildren. Reading newspapers, recipes, food labels, instructions for appliances, and most importantly, prescription labels is impossible without the assistance of a magnifier. Without a magnifier, they would need to depend upon the assistance of family, friends, and neighbors making spontaneous tasks such as identifying two prescriptions in identical bottles impossible. Magnifiers are absolutely essential tools for individuals with low vision. I encourage you not to institute the proposed rule on low vision aid exclusion.

Barbara Jackson LeMoine 2829 Connecticut Avenue, N.W., Apt. 512 Washington, DC 20008 202-462-6325 bjlemoine@comcast.net

Submitter:

Mrs. Michelle Antinarelli

Organization:

**AMESVI** 

Category:

Individual

**Issue Areas/Comments** 

Low Vision Aid Exclusion

Low Vision Aid Exclusion

This exclusion creates a whole new population—deliberately blinded people. Without these devices the low vision population, already limited in their ability to successfully and effectively access their world, are removed from the realm of consideration. Instead of being able to read prescription labels and take medications independently, this group of people will require either a home health care aide or nursing home care. Instead of being able to dial a phone and order take-out from a menu, this group of people will have to subscribe to 'Meals on Wheels.' Instead of being able to read the newspaper and make decisions about voting issues, this group of people will have to request social service agencies to help them exercise their legal rights to vote on issues at hand. Although decreasing the amount of financial burden on the Medicare provider—this measure also disperses the financial onus among many human service agencies and caregivers—at the expense of the independence and dignity of the individual with low vision.

Submitter:

Mrs. Georgia Hamlin

Organization:

Mrs. Georgia Hamlin

Category:

Individual

Issue Areas/Comments

#### Low Vision Aid Exclusion

#### Low Vision Aid Exclusion

Excluding Low Vision devices, which can be very costly for an individual to purchase and may need to be changed as vision changes, would put many people at risk of losing their independence. Their ability to travel safely could be impacted and they might be denied the use of vision to direct their daily activities... thereby imposing a more restrictive lifestyle on them. This could also impose dangerous risks. They might choose wrong meds or doses if they couldn't read small print on labels. They might have difficulty reading meters to track blood sugar and make errors in regulating diets. Using cookbooks, reading a card or letter, reading bills and writing checks, shopping and seeing labels on cans, reading newspapers, Ad circulars, church bulletins, recreational reading, reading directions for new devices, locating public transportation...just a sampling of the every day activites that would be more difficult or impossible for low vision clients without the assistance of low vision devices. Certainly, there would be a drastic loss of quality of life, independent functioning and productivity.

I urge you to reconsider this exclusion in the light of its importance in the daily lives of the users. Perhaps a library of devices could be maintained to circulate them if they were in good condition and no longer needed by a user, thereby keeping costs down.

Submitter:

Ms. Lenore Schwager

Finger Lakes Independence Center

Organization: Category:

**Consumer Group** 

Issue Areas/Comments

## Low Vision Aid Exclusion

Low Vision Aid Exclusion

It is essential that individuals with vision loss be covered for low vision aids or technologies so that they can remain as independent as possible for as long as possible. Without this coverage many will be forced to be placed in assistive living or nursing homes. Please do not discourage people with vision loss from being able to maintain their independence as long as possible. Thank you

Submitter:

Dr. Mark Stracks

Organization:

Psy-Visions, LLC

Category:

Physician

**Issue Areas/Comments** 

## Low Vision Aid Exclusion

Low Vision Aid Exclusion

I am writing to comment on section 414.15 of file code CMS-1270-P, 'Low Vision Aid Exclusion'. As a physician and blind consumer I feel that such an exclusion would have detrimental effects on healthcare quality for blind and visually impaired clients. Clients utilize low vision aids to read medication directions, monitor blood sugar, monitor blood pressure, travel to and from medical appointments and appointments for diagnostic testing. Such aids allow for clients to take notes when health care professionals are explaining important concepts regarding a client's health status, or specifics of management issues. Such aids allow clients to interpret and complete paperwork provided by physicians, labs, pharmacies, and Medicare/Medicaid. To eliminate the availability of such devices would invariably lead to a decrease in the ability of an entire subset of the population to avail themselves of, and comply properly with, preventative health care maintenance and acute health care management. This, in turn, would likely lead to an increased utilization of emergency services, increased costs, and overall less efficacious outcomes for this group of clients.

I would strongly advise reconsideration of and repeal of this exclusion. It's inclusion can be nothing but harmful.

Sincerely,

Mark D. Stracks, MD, MS, MPH President, Psy-Visions, LLC

Submitter:

Mr. Winston Smith

Organization:

Stephen F. Austin State University (student)

Category:

Academic

Issue Areas/Comments

## Low Vision Aid Exclusion

Low Vision Aid Exclusion

Excluding low vision aids from Medicare beneficiaries will profoundly limit their independence in all aspects of their daily lives. The amount saved by this proposed exclusion would be far outweighed by the cost of caring for these individuals with low vision whom, once they no longer have access to these low vision aids, must have assistance from others in almost all the activities of daily living. With eyeglasses alone many of these people will, for all practical purposes, be no longer able to read. Without monocular telescopes and other distance aids they will no longer be able to travel independently, and any attempt by them to do so has a great risk of personal injury. This also will contribute to the cost of this proposed exclusion.

Submitter:

Date: 05/04/2006

 ${\bf Organization:}$ 

Category:

Individual

Issue Areas/Comments

Low Vision Aid Exclusion

Low Vision Aid Exclusion

I strongly oppose this exclusion for low-vision consumers like myself...many of them do not have enough income to be able to purchase expensive equipment such as CCTVs, magnifiers, etc. to help them have a more independent life. These devices could enable them to have a job and not to depend on their families/friends for extra help. PLEASE reconsider this and restore the inclusion of Low Vision Aid.

Submitter:

Peggy Silliman

Organization:

Midwest Meidcal Services, Inc

Category:

Other Health Care Provider

Issue Areas/Comments

**GENERAL** 

**GENERAL** 

See Attachment

CMS-1270-P-13-Attach-1.DOC

Page 6 of 17

May 08 2006 08:07 AM

May, 2006

Department of Health and Human Services Attention: CMS-1270-P PO Box 8013 Baltimore MD 21244-8013

RE: Comment of CMS-1270-P Proposed Rule

# **ELIMINATION OF SUPPLIERS**

We are a small DME company (one store) in the Midwest. After reading the complete document I'm sure that the authors have not been to a DME supplier like ours and actually seen what we do everyday. We are part of the 90% (page 148 of the document) you will eliminate. We are not a big national company that has set up shops all over the US, with nothing in them, but the standards posted and the back room full of oxygen supplies. On a daily bases if you stop at these shops, no one is there, and it is impossible to return any equipment or speak to a person about problems with equipment, or extra education of the equipment. Yes, they qualify as a supplier because they have a building, with a sign, posted hours, standards posted, but where is the service to beneficiaries, which is what CMS is saying this is all about, when no one is at the site and phone calls go to an answering machine. However, our company sees every type of patient, every day, including ostomy, diabetic, wheelchair, wound care, along with hip kits, reachers, bed pans, etc. So, who will service all of these beneficiaries with these products, and still stay in business. National companies only have respiratory in mind and will leave the small stuff to the small companies. In the trial counties has

there been a site visit to the winning bidder's locations to check all this out before we move on to the next competitive bidding step.

# **ACCREDITATION**

We are not accredited, but for our 25 years of service we have always complied with the standards, and slowly worked on heading toward this step. We think accreditation is a good move, making everyone accountable. Our concern is who will do the accreditation that knows our industry. The big accreditation organizations, which we have investigated, are hospital orientated, and they have a whole different agenda, and offerings to their mix (ex. home health nursing). We need an agency that will understand driving 90 miles to see a patient, address the limited staff, the limited office space, and income.

# **BIDDING PROCESS**

The bidding process is complicated for a small DME company. Why does it have to be such a mystery and confusing? We do not have one person in this company (8 people) that isn't working every minute of every day. Who would have 70 hours to do a bid and how do we justify the cost of \$2200, when we can't understand the complicated bidding process to see if there is even a chance against all the large nationals, that have planted themselves everywhere.

You want quality at the lowest price, and believe me, quality will suffer. We know the cost of taking care of patients. It has been our passion for years, and we can only hope that someone will step up and look at the "big picture" of who the winners really are in this game.

Peggy Silliman, Owner Midwest Medical Service Watertown, South Dakota

Submitter:

Mrs. Maria Tessier

Organization:

Mrs. Maria Tessier

Category:

Academic

**Issue Areas/Comments** 

#### Low Vision Aid Exclusion

Low Vision Aid Exclusion

As a Teacher of the Visually Impaired, I want to stress to you the importance of low vision devices for independence for the visually impaired population. Taking away such a device would be like taking away your car and saying that riding a bike is just as good. Low Vision aids such as CCTV's, magnifiers, monoculars, etc, allow a person to live life as normally as possible and be independent to the highest degree. Vision loss is devestating in and of itself. These devices offer hope that a person can at least continue to function somewhat to the same degree of normalcy that they used to. Reading one's mail, following a recipe to make a meal, or just using a low vision aid to see medications allows a person to function without dependency on other services. Each human being is entitled to be as independent as possible and sometimes that means having an aid or device to do so. It is much more cost effective to pay for low vision aids than it is to hire staff to do the same tasks that the low vision person could do independently with a simple device. Please support the purchase of low vision devices. It is so important!

Submitter:

Mrs. Cynthia Rosenthal

Organization:

Mrs. Cynthia Rosenthal

Category:

Individual

**Issue Areas/Comments** 

## **Low Vision Aid Exclusion**

Low Vision Aid Exclusion

As the U.S. population grows older, more of us will have vision problems and will need technology to enable us to function—to read mail, such Medicare announcements; to pay bills and write checks; to use the telephone; to read clocks; and even to get around physically without bumping into things. Such equipment, just like wheelchairs and walkers, should be included in Medicare.

In addition to the elderly with degenerative vision problems, younger people who are blind or vision-impaired should be able to acquire devices to enable them to function in society, in the same way that other people physically impaired due to disease or accident can, with the help of Medicare.

May

Submitter:

James Martin

Organization:

James Martin

Category:

Individual

**Issue Areas/Comments** 

Low Vision Aid Exclusion

Low Vision Aid Exclusion

Prosthetics for nearly every other disability are covered by Medicare. Why should people who have low vision be denied such coverage?

Submitter:

**Richard Phelps** 

Organization:

**AACB** 

Category:

Individual

Issue Areas/Comments

Low Vision Aid Exclusion

Low Vision Aid Exclusion

I am very concerned that this proposed Section 414.15 or Low Vision Aid Exclusion would exclude CCTVs and other electronic magnification aides. This would be devastating to those uf us who depend on CCTVS and other devices in our daily lives. Please immediately reconsider this rulling; I'll be contacting my Senator and Representive about this matter.

Submitter:

Ms. Jody Niemann

Organization:

Ms. Jody Niemann

Category:

Occupational Therapist

Issue Areas/Comments

## Low Vision Aid Exclusion

#### Low Vision Aid Exclusion

I am an occupational therapist working in a skilled nursing facility that provides low vision rehabilitation training on both an inpatient and outpatient basis. Low vision devices recommended by a qualified professional should be covered by Medicare to enhance the independence, safety, and quality of life for the Medicare beneficiaries with low vision. Deficits in low vision can impact a person's life negatively if there is no treatment by a qualified low vision professional to allow the person to utilize the residual vision. Persons with low vision (even 'legally blind') are not blind and do have residual vision to utilize with daily tasks and functional mobility with training. If training with low vision assistive devices is provided, a person with low vision can remain in their own homes with no or minimal outside assistance and reliance on others which is a clear benefit to that person but also to the community as a whole and financially to the budget as these people will be less likely to have accidents in their environment such as burns while cooking or falls with ability to use the devices and training by occupational therapy to utilize residual vision effectively. I do see great benefit with the magnification devices for safety issues with increased ability to read necessary items such as medications bottles/packages, food preparation instructions and expiration dates, and financial correspondence. There are many examples that allow people to be safe in their own environments with training on low vision devices and safety leads to prevention which should be a key focus to having a 'well elderly' population to avoid increasing health care costs. I urge the reconsideration of excluding low vision devices from coverage when the devices are recommended and evaluated by a qualified health care professional such as an occupational therapist.

Submitter:

Dr. Diane Wormsley

Organization:

Pennsylvania College of Optometry

Category:

Individual

Issue Areas/Comments

Low Vision Aid Exclusion

Low Vision Aid Exclusion

Excluding low vision aids and devices for people who have low vision will greatly detract from their attempts to become independent in performing visual tasks. Low vision aids are cost effective in that they allow people to do for themselves, and not rely on others who might need payment for services. The people time is much more costly than the cost of the individual devices which can be used over a long period of time. Please reconsider this exclusion.

Submitter:

Mrs. Rachel Ethier Rosenbaum

Organization:

The Carroll center for the blind

Category:

Other Health Care Professional

Issue Areas/Comments

## **Regulatory Impact Analysis**

Regulatory Impact Analysis

Docket: CMS-1270-P - Medicare Program; Competitive Acquisition for Certain Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) and Other Issues: Low Vision Aid Exclusion

Regulatory Impact Analysis

May 5, 2006 Centers for Medicare & Medicaid Services Department of Health and Human Services Attention: CMS-1270-P P.O. Box 8013 Baltimore, MD 21244-8013

Docket: CMS-1270-P - Medicare Program; Competitive Acquisition for Certain Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) and Other Issues: Low Vision Aid Exclusion

"We are proposing to clarify that the scope of the eyeglass coverage exclusion encompasses all devices irrespective of their size, form, or technological features that use one or more lens [sic] to aid vision or provide magnification of images for impaired vision. This proposed regulatory provision clarifies that the statute does not support the interpretation that the term eyeglasses only applies to lenses supported by frames that pass around the nose and ears."

The NPRM specifically invites comment from the public on this matter. Comments are due June 30, 2006. Comments should be submitted electronically.

#### Dear Sir or Madam:

I have been the director of the Carroll Center for the Blind since 1976. In the course of these 30 years I have worked with thousands of blind and visually impaired persons seeking to maintain their independent lives. In these 30 years there has been an explosion in innovation of devices that improve the daily lives of disabled persons and blind person have also profited from these innovations in technology This is what has made our country great!

Individuals, and especially senior citizens, with low vision use magnifiers to perform many ordinary daily tasks of independent living. For example—they use magnifiers when grocery shopping, to read bus schedules so they can travel independently, and to read clothing labels to determine if a garment is washable or needs to be dry cleaned. A magnifier is used for reading newspapers, menus, recipes, food labels, instructions for appliances, and most importantly, prescription labels. It can be impossible without the assistance of a magnifier to perform spontaneous tasks such as differentiating between two different prescriptions in identical bottles without the assistance of family, friends, or neighbors. Besides helping to accomplish the important daily living tasks, imagine the joy of your grandmother whose vision is now hazy to be able see the latest family photos of her treasured grandchildren. But that is not all&

Privacy is important--most people don t want anyone else, even family members, reading their bank statements, financial documents, or bills. Individuals with low vision use magnifiers to read these very personal documents and to write checks and read currency.

Magnifiers are absolutely essential tools for individuals with low vision.

I encourage you to reconsider your ruling; DO NOT institute the proposed rule on low vision aid exclusion.

All of us boomers await your ruling with interest.

Sincerely,

Rachel Ethier Rosenbaum, President

## Regulatory Impact Analysis

Regulatory Impact Analysis

Not allowing the inclusion of closed circuit television and magnifiers to be consuidered as durable medical equipment

CMS-1270-P-20-Attach-1.DOC

CMS-1270-P-20-Attach-2.DOC



# The Carroll Center for the Blind

770 Centre Street, Newton, MA 02458 + (617) 969-6290 | Fax (647) 969-6281 | 1-880-882-3131 | www.cerroll.org

May 5, 2006
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1270-P
P.O. Box 8013
Baltimore, MD 21244-8013

Docket: CMS-1270-P - Medicare Program; Competitive Acquisition for Certain Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) and Other Issues: Low Vision Aid Exclusion

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Privacy is important--most people don't want anyone else, even family members, reading their bank statements, financial documents, or bills. Individuals with low vision use magnifiers to read these very personal documents and to write checks and read currency.

Magnifiers are absolutely essential tools for individuals with low vision. I encourage you to reconsider your ruling; DO NOT institute the proposed rule on low vision aid exclusion. All of us **boomers** await your ruling with interest.

Rachel Ethier Rosenbaum, President